1349682



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:						
Estimated average burden						
hours per respons	se 16.00					

SEC USE ONLY					
Prefix	Serial				
DATE F	ECEIVED				
1					

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Offering of Securities to accredited investors.	OF C MAIL
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE COEIVED O
Type of Filing: New Filing Amendment	444
A. BASIC IDENTIFICATION DATA	200c
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	ECTION
Spirit AeroSystems Holdings, Inc.	35
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
3801 South Oliver, MC K11-60 Wichita, Kansas 67210	316-526-9000
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Same as above	Same as above
Brief Description of Business	
Spirit AeroSystems Holdings, Inc.'s business consists of the design, production and sale of support services related thereto.	parts for commercial aircraft and the provision o
Type of Business Organization x corporation limited partnership, already formed other (p business trust limited partnership, to be formed	please specify): PROCESSED
Month Year Actual or Estimated Date of Incorporation or Organization: O 2 O 5 X Actual Estin Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	mated FINANCIAI

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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A. BASIC IDENTIFICATION DATA									
2. Enter the information requested for the following:									
• Each promoter of the issuer, if the issuer has been organized within the past five years;									
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issue	т.								
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and									
Each general and managing partner of partnership issuers.									
Check Box(es) that Apply: Promoter Beneficial Owner X Executive Officer Director General and/or Managing Partner	_								
Full Name (Last name first, if individual) Wright, Nigel	_								
Business or Residence Address (Number and Street, City, State, Zip Code) 161 Bay Street, Suite 4900 Toronto, Ontario M5J 2S1									
Check Box(es) that Apply: Promoter Beneficial Owner 🗶 Executive Officer 🔀 Director General and/or Managing Partner									
Full Name (Last name first, if individual)	-								
Mersky, Seth	_								
Business or Residence Address (Number and Street, City, State, Zip Code)									
161 Bay Street, Suite 4900 Toronto, Ontario M5J 2S1 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or	_								
Check Box(es) that Apply: Promoter E Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual) Onex Corporation	_								
Business or Residence Address (Number and Street, City, State, Zip Code)	_								
161 Bay Street, Suite 4900 Toronto, Ontario M5J 2S1									
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual)									
Onex Partners LP									
Business or Residence Address (Number and Street, City, State, Zip Code) 712 Fifth Avenue, 40th Floor New York, New York 10019	_								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	_								
Full Name (Last name first, if individual)	_								
Business or Residence Address (Number and Street, City, State, Zip Code)									
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner	_								
Full Name (Last name first, if individual)									
Business or Residence Address (Number and Street, City, State, Zip Code)	_								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner									
Full Name (Last name first, if individual)	_								
Business or Residence Address (Number and Street, City, State, Zip Code)									

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

				B. IN	NFORMAT	ON ABOU	T OFFERI	NG	,			
1 77 7		,						.1.1 00 1			Yes	No
1. Has the							\boxtimes					
2. What is	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?						_{\$} 25,000					
					p • • • • • • • • • • • • • • • • • • •	,				•••••	Yes	No
	_	permit joint		_								X
commi If a per or state a broke	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.											
Full Name (•	first, if indi or selling r		on will be	paid in con	nection wi	th this tran	saction.				
Business or										-		
												777
Name of As	ssociated Bi	roker or Dea	aler									
States in W	hich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check	"All States	s" or check	individual	States)					•••••		☐ Al	l States
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Full Name	(Last name	first, if indi	ividual)								- Sues	
Business o	r Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)			<u>.</u>			
Name of As	ssociated B	roker or De	aler						_mas			
States in W	hich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check	"All State	s" or check	individual	States)				••••••	••••••		☐ Al	1 States
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Full Name	(Last name	first, if ind	ividual)									
Business o	r Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Name of As	ssociated B	roker or De	aler				Alvin Helico					<u> </u>
States in W	hich Person	Listed Ha	Solicited	or Intends	to Solicit	Purchasers						
		s" or check									☐ Al	1 States
AL IL MT	AK IN NE	AZ IA NV	AR KS NH	CA KY NJ	CO LA NM	CT ME NY	DE MD NC	DC MA ND WA	FL MI OH	GA MN OK	HI MS OR WY	ID MO PA

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCE

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Price		Amount Already Sold
	Debt	\$		\$
	Equity			\$ 400,000.00
	Common		_	
	Convertible Securities (including warrants)	\$		\$
	Partnership Interests			
	Other (Specify)			
	Total			
	Answer also in Appendix, Column 3, if filing under ULOE.	·	_	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			Aggregate Dollar Amount of Purchases
	Accredited Investors	1	_	\$_400,000.00
	Non-accredited Investors		_	\$
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
		Type of		Dollar Amount
	Type of Offering	Security		Sold
	Rule 505		_	\$
	Regulation A		_	\$
	Rule 504			\$
	Total		-	\$
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			\$
	Printing and Engraving Costs			\$
	Legal Fees		×	\$_1,000.00
	Accounting Fees			\$
	Engineering Fees			\$
	Sales Commissions (specify finders' fees separately)			\$
	Other Expenses (identify)			\$
	Total	•		\$ 1,000.00

<u>:</u>	C. OFFERING PRICE, N	UMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	and total expenses furnished in response to Part C	offering price given in response to Part C — Question C — Question 4.a. This difference is the "adjusted gro	SS	\$1,999,000.00
5.	each of the purposes shown. If the amount fo	s proceed to the issuer used or proposed to be used for any purpose is not known, furnish an estimate areal of the payments listed must equal the adjusted groupert C — Question 4.b above.	ıd	
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		🔲 \$	
	Purchase of real estate		🗌 \$	_ [\$
	Purchase, rental or leasing and installation of and equipment	machinery	🔲 \$	s
	Construction or leasing of plant buildings and	facilities	🔲 \$	\$
	Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)		ПС	
	Working capital		🗆 \$	TR\$1,999,000.00
			🔲 💲	\$
	Column Totals		[] \$	图 \$ <u>1,999,00</u> 0.00
	Total Payments Listed (column totals added) .		X 5 1	,999,000.00
d		D. FEDERAL SIGNATURE		
ig	nature constitutes an undertaking by the issuer to	y the undersigned duly authorized person. If this noti of furnish to the U.S. Securities and Exchange Commacceedited investor pursuant to paragraph (b)(2) of	iission, upon writte	
SS	uer (Print or Type)	Signature	Date	
	pirit AeroSystems Holdings, Inc.	World .	December	28, 2005
	me of Signer (Print or Type) gel Wright	Title of Signor (Print or Type) Vice President, Secretary and Treasurer	J	
141	ger vragar	vice rresident, Secretary and Treasurer		